

Tactile Motion on the Glabrous Hand of Human and Non-Human Primates

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Tactile motion is a complex perceptual experience that requires a nervous system built from the ground up to allow rapid processing of spatial and temporal sensory information. Tactile motion relies primarily on Meissner corpuscles (RA-1), although Merkel cell-neurite complexes (SA-1) and Pacini corpuscles (RA-2) also play roles. Primary afferent projections from these receptors transmit sensory information to the brain in large fast fibers, and with high fidelity. The organization of primary somatosensory cortex is optimized for location and receptor type. Receptive fields of neurons in SI adapt with motion in order to increase feature selectivity. Neurons responding to motion, direction, and orientation can all be found in SI. Complex stimulus features, such as motion velocity, are resolved by population coding. Higher cortical areas for motion processing, such as the human motion complex (hMT+), are probably multisensory. Vision, in particular, seems to share motion processing architecture with the tactile modality. As in vision, tactile motion illusions may shed light on the cortical processing of motion, particularly when paired with functional imaging techniques. Apparent motion and the tactile motion aftereffect are two such illusions discussed in this review.

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In order to discuss tactile motion, it is first necessary to reveal the relevant biological pathways in cutaneous motion perception. The real action in tactile motion perception begins at the receptor surface of the somatosensory system, namely the skin. When the skin is deformed by physical stimulation, specialized mechanoreceptive neurons called primary afferent neurons are depolarized. This is possible because the terminal ends of these neurons contain mechanotransducer channels. These channels are normally closed but open when flexed. The exact mechanisms for this opening are varied¹⁻² and are not as well characterized as the mechanically gated channels of stereocilia in cochlear hair cells³. The induced currents from open channels can be recorded from the cell soma in the dorsal root ganglion⁴. Upon mechanical stimulation, these channels open, and cations, such as Na⁺ and Ca²⁺, rush into the terminal. If the inward rush of positive current is sufficient, then an action potential is produced. This basic transduction mechanism underlies the broad spectrum of mechanical somatosensation, including motion.

Mechanoreceptors of motion

The wide range of sensory percepts experienced is due to

different morphologies and anatomic locations of primary afferent terminals. In order to discuss motion on the glabrous skin of the hand, it is necessary to consider at least these afferent terminals: Meissner corpuscles, Merkel cell neurite complexes, and Pacinian corpuscles. These different mechanoreceptors are typically classified by their rate of adaptation to a stimulus. The rapidly adapting (RA) mechanoreceptors are Meissner corpuscles (RA-I) and Pacinian corpuscles (RA-II), whereas the slowly adapting (SA) mechanoreceptor is the Merkel cell neurite complex (SA-I). A second class of slowly adapting mechanoreceptors, Ruffini corpuscles (SA-II), are not present in the glabrous hand of the primate and exist only in tiny numbers in the glabrous hand of humans⁵. SA-I afferents terminate at Merkel cells at the base of the epidermis, the outermost layer of skin⁶. These afferents are densely populated in the glabrous skin of the hand, and provide precise localization and pressure information. RA-I afferents terminate in Meissner corpuscles just below the epidermis⁷, are layered with specialized Schwann cells, and respond well to slip, flutter and motion. RA-II afferents terminate at the base of the dermis in Pacinian corpuscles⁸ and respond preferentially to vibration. Each of these mechanoreceptor types contributes to motion in a unique way.

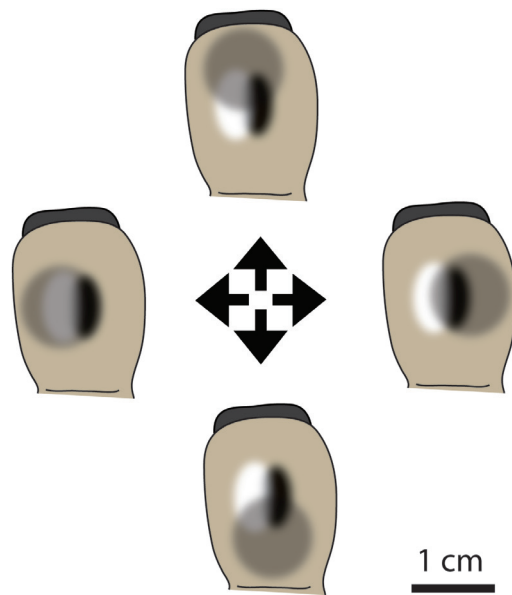


Figure 1: *Receptive fields as seen in Area 3b neurons.* On these four monkey fingertips, fixed excitatory (white), smaller fixed inhibitory (black) and larger lagged inhibitory (gray) receptive fields can be seen. The arrows in the center of the image signal the direction of a motion stimulus passing over the nearest fingerpad. The lagged inhibitory receptive field slides in the same direction as that of the motion stimulus, thereby modifying the overall receptive field. Note that these receptive fields are for illustration only and are not drawn to scale.

Dermatopic map:

A continuous representation of the somatic sensory surface, the skin. In this map, each fiber is beside the fiber that innervates the adjacent skin, and there are no breaks.

Somatotopic map:

A representation of body parts, some of which may be disconnected from the representation of adjacent skin areas. For example, the somatotopic map in primary somatosensory cortex has the thumb mapped next to the lower lip.

Modality:

A term that refers to the type of primary afferent, such as RA-1, SA-1, etc. Conservation of modality means that information from different primary afferent types stays segregated.

Mechanoreceptive afferent fibers can be individually recorded by microneurography⁹⁻¹². This has allowed characterization of the output of the different mechanoreceptor types. This has also allowed direct measurement of receptive fields. Receptive field sizes for RA-I and SA-I fibers are 6.2mm and 4.8mm, respectively¹³. These receptive fields are not homogeneous, as they contain hotspots where some terminal branches are more sensitive than others¹⁴. For example, SA-I and RA-I fibers increase their firing rates linearly with indentation¹⁵⁻¹⁶. It was also discovered that making a second indentation in the skin just outside the receptive field produces a suppressive effect by means of relieving skin pressure in the receptive field¹⁷.

Sensory transmission to the Central Nervous System

Mechanoreceptor afferent fibers are all large, myelinated A-beta fibers with conduction velocities between 36-73 m/s¹⁸. These properties are beneficial to rapid signal transmission to the central nervous system. Large-fibered mechanoreceptors project through the dorsal columns¹⁹ of the spinal cord to the dorsal column nuclei. Dermatopy is preserved in the dorsal column, where sacral fibers are

the most medial and cervical fibers are the most lateral²⁰⁻²¹. These fibers rearrange before synapsing in the dorsal column nuclei, shifting from a dermatopic map to a somatotopic map²². The primate cuneate nucleus contains a complete somatotopic representation of the sensory surfaces of the hand²³.

Medial lemniscal pathway. Under normal physiological conditions, dorsal column nuclei relay cells faithfully transmit the impulses of the primary afferent neurons²⁴⁻²⁷. These cells project through the medial lemniscus to type I relay cells in the lateral division of the ventral posterior nucleus (VPN) of thalamus (Vc in humans). The VPN is also somatotopically organized²⁸⁻²⁹. The region of the VPN containing cutaneous afferents from the lemniscal tract projects to layers 4 and 3 of Areas 3b and 1 of somatosensory cortex³⁰.

Thalamus and SI cortex. Place and modality information are conserved from thalamus to Area 3b and 1³¹, although signal transmission depends on vigilance. The amount of convergence from peripheral receptor to Area 3b is so restrained that Area 3b receptive field sizes are just 2-3 times the size of primary afferent receptive fields³². Dense microelectrode mapping demonstrates that there are somatotopic maps in areas 1 and 3b³³⁻³⁴, demonstrating the

conservation of place information. The fingers representations in Area 1 and 3b point away from each other³⁵. The hand representation can also be located histologically³⁶, or, in humans, anatomically³⁷⁻⁴¹ or by electrical cortical stimulation in waking humans⁴²⁻⁴⁴. These areas display a columnar structure⁴⁵, with different cortical columns representing different modalities, SA or RA⁴⁶.

All of the information so far illustrates that sensory information transduced by primary afferents in the skin is transmitted to cortex with high fidelity of place and modality information.

In some cases, primary afferent responses closely mimic psychophysical responses. For example, both primary afferent firing rates¹⁵⁻¹⁶ and psychophysically perceived pressure⁴⁷ increase linearly with skin indentation. Another example is that RA-1 tactile thresholds match psychophysical thresholds⁴⁸⁻⁴⁹. Furthermore, a single impulse in a single RA-1 fiber from the fingerpad produces a tactile percept¹². The cortex is essentially the bridge between stimulus transduction and tactile perception. Additional evidence linking cortical processing to this percept comes from finding BOLD response⁵⁰ and evoked potentials⁵¹ from the same stimulus.

The rapidity and fidelity of tactile information, as noted above, allow for motion processing. If a finger is held on a surface without moving, spatial features of that surface are only weakly observed. However, even surface features a few microns tall can be perceived on a moving surface⁵². RA-1 afferents are thought to be responsible for this gain of function with movement^{14,53}. This is especially true regarding slip of a smooth surface⁵⁴. Because RA-1 afferents are silent when held motionless on a surface, only the SA-1 afferents collect useful information. When the surface is moved, the RA-1 and SA-1 afferents can respond to raised dots as small as 2-4 μm and 8 μm in height, respectively⁵². The detection of edges, as opposed to dots, is possible at sub-micron heights⁵⁵. Interest-

ingly, sensitivity does not change over a wide range of velocities (10-40 mm/s)⁵². However, optimal velocity ranges do differ depending on skin type and, presumably, receptor density. Essick et al.⁵⁶ showed that optimal velocities for motion to be perceived on the fingertip of humans ranged from 15 to 94 mm/s whereas for the proximal forearm the optimal velocities were 115-312 mm/s. Strokes of movement had to be 5.9 times longer on the forearm than on the fingertip in order to obtain the same sensitivity⁵⁶. While increased force and velocity increase firing rate, the spatial pattern of firing does not change⁵⁷.

Cortical processing of motion

Primary somatosensory cortex processes basic sensory input to reveal complex features. One important cortical process is to use population coding. For example, localization discrimination thresholds on the fingertip can be as low as 0.38 mm for a 1.9 mm tactile probe⁵⁸. Although there is overlap in the area that the probe depresses in such intervals, the population responses are different enough to discriminate. Significantly, this discrimination threshold is smaller than the receptive fields of single primary afferents. Other complex percepts, such as curvature, orientation, movement, and direction, also require population coding.

Receptive fields of Area 3b neurons have been described in detail^{32,59-61}. 95% of these neurons have an excitatory field of about 24 mm² on the skin, with a range of 3-43 mm². However, about 5% of 3b cells in the same study had two or more excitatory receptive field regions. They also have an adjacent inhibitory field of about 18 mm², with a range of 1-47 mm². This configuration enhances feature contrast and preference. Remarkably, there is also a dynamic, delayed inhibitory field, whose position is not fixed, but rather biases in the direction of motion³². The 30 ms delay of this inhibitory field could serve to suppress minor features in the scanning direction on smooth surfaces and to emphasize novelty. At sufficient scanning speeds, it may even serve to confer directional

Orientation:

A cell is said to have orientation preference if its preferred stimulus passes through the receptive field at a specific angle, regardless of direction.

Motion:

A cell is said to have motion preference if its preferred stimulus moves through the receptive field at any angle and direction.

Direction:

A cell is said to have direction preference if its preferred stimulus moves through the receptive field in one direction, but not the opposite direction.

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Intrinsic optical imaging:

This functional imaging technique collects back-scattered light from the cortex and detects metabolic activity as oxygen-deficient hemoglobin absorbs more light than oxygen-rich hemoglobin.

preference⁶¹. Thus, Area 3b is the first stage of processing in the somatosensory system known to process motion.

Cortical neurons in Areas 3b, 1, and 2 are known to be sensitive to direction (60%), motion (37%), and orientation (3%)⁶². These cells are evenly split between RA type and SA type receptive fields⁶³. Motion cells are mostly located in Area 3b, whereas direction cells are mostly located in Areas 1 and 2. Most of this processing seems to occur in layer 3, as opposed to layer 4 where most thalamic projections terminate⁶⁴. Direction variant cells have also been found⁶⁵⁻⁶⁷. These cells respond to stimulus movement toward or away from a specific spot in the receptive field, typically located over a joint. Although primary somatosensory cortex (SI) has a broad variety of motion sensitivity, the higher-level characteristics of motion, such as velocity, appear to be processed in higher cortical areas.

Motion processing is thought to follow the dorsal pathway, which is used to guide movements. A number of imaging studies have implicated inferior parietal lobe and the human motion complex (hMT+)⁶⁸⁻⁷¹, although it has been proposed that the medial superior temporal area (MST) rather than the middle temporal area (MT) processes tactile motion⁷². Area hMT+ is best known for its role in visual motion processing. However, thanks to functional lesion studies with repetitive Transcranial Magnetic Stimulation (rTMS), it also appears to be necessary for tactile motion speed perception⁷³⁻⁷⁴. In order to deduce whether the area is truly multisensory or not, several studies have looked at combined visual and tactile motion paradigms. Results have included findings of facilitation between modalities⁷⁵ as well as interference between modalities⁷⁶⁻⁷⁷. These studies imply that there are shared resources for visual and tactile motion, lending further support to the idea that hMT+ is a multisensory motion processing area.

Motion Illusions

One of the major goals of cortical studies of motion is to uncover the neural correlates of perception. One way to study this is to use illusions in order to dissociate perception from reality. If the cortical area follows the real stimulus instead of the perceptual experience, then the area is not implicated in the illusory processing. Since many complex cortical processes use population coding, studying such processes at the single neuron level is unfeasible. Imaging methods are much better suited to study population coding, as they can look at processing within or between areas. Intrinsic optical imaging and functional Magnetic Resonance Imaging (fMRI) have been used to study the funneling illusion, finding that Area 3b activation reflects the perceived location rather than the somatotopic location⁷⁸⁻⁸⁰.

Several interesting tactile motion illusions exist and have been psychophysically characterized. One of these is apparent motion. Apparent motion is perceived motion created by sequential discrete tactile stimulations on spatially disparate skin locations. The spatial pattern of stimulation and type of movement (expanding, contracting, etc) have little effect on the saliency of the apparent motion, but the optimal range of inter-stimulus intervals varies with stimulus duration^{81,82}. The cortical mechanisms of apparent motion are not fully understood, but methods are being developed to probe this question with intrinsic optical imaging and fMRI⁸³⁻⁸⁴. These techniques offer the wide field of view necessary to study population coding. However, they sacrifice considerable spatial resolution in doing so. One promising technology that could be applied to tactile motion imaging is voltage sensitive dye imaging⁸⁵. This technique has already been applied to visual motion⁸⁶ and offers temporal resolution on the order of milliseconds. For a rapidly developing, complex stimulus such as motion, such a technique may be necessary to understand the mechanisms of cortical motion processing.

Another promising tactile motion illusion is the motion aftereffect (MAE). By generating a

continuous motion stimulus for a period of time (up to several minutes) and suddenly removing the stimulus, a tactile motion sensation in the other direction is produced⁸⁷⁻⁸⁹. This is very similar to the visual motion aftereffect. In fact, Konkle et al.⁹⁰ found that the aftereffect can transfer between tactile and visual modalities. This further suggests the existence of shared processing for motion in the two modalities. The tactile MAE is probably conferred through RA-1 afferents, as it is much more difficult to evoke in skin locations with a lower innervation density of these fibers⁹¹. There are now tactile MAE paradigms designed specifically to elicit the best responses from RA-1 afferents⁹². Interestingly, the tactile MAE is produced even with apparent motion across crossed digits⁹³. This means that the tactile MAE reflects environmental space as opposed to tactile space. The cortical correlates of this illusion are unknown, but a recent fMRI investigation shows that only SI remains active during the illusion⁹⁴, suggesting a functional role in the illusion.

The biological study of tactile motion seems to be entering a new era. Whereas microneurography and single-unit electrophysiology still dominated the field at the turn of the 21st century, the pendulum is swinging towards studies of population dynamics in relatively large cortical areas. Imaging methods, such as voltage sensitive dye imaging, offer a larger scope on cortical processing. The presence of two robust tactile illusions may prove to be critical for dissociating sensory and perceptual processing.

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